



Senate Bill 139 Discussion

August 20, 2018



Overview

Senate Bill 139 with Senate Amendment 1:

- Requires health insurance offered in Delaware provide coverage for fertility care services including In Vitro Fertilization for individuals who suffer from a disease or condition that results in the inability to procreate or to carry a pregnancy to live birth
- Also provides for fertility preservation for individuals diagnosed with cancer or other diseases where treatment could adversely impact their fertility
- Expressly exempted employers who self-insure their health insurance plans

Current State Group Health Plan Infertility Coverage

Infertility services are covered for:

- Artificial Insemination (AI) and Intrauterine Insemination (IUI)
- In Vitro Fertilization (IVF) and related procedures
- Coverage parameters:
 - Dependent Children are not eligible
 - Women must be at least age 18 and not have reached their 45th birthday
 - Must be approved for coverage due to proven infertility problem which is not due to voluntary sterilization of either partner
 - Age appropriate AI and IUI must be tried before IVF
 - \$10,000 lifetime medical limit for all infertility services
 - \$15,000 lifetime pharmacy limit for all infertility services
 - Members pay 25% coinsurance for medical services and prescriptions

Current State Group Health Plan Medical Infertility Coverage

- Number of members currently approved for IVF and who have not reached the medical maximum of \$10K– 325
- Number of members currently approved for IVF and who have reached the medical maximum of \$10K and are under age 45 - 93

Current State Group Health Plan Infertility Medical Claim Costs FY15 to FY18

Time Period	Paid	Member Share	Members	Plan Paid / Member
FY16	\$953,311	\$167,207	427	\$2,232
FY17	\$1,259,662	\$225,463	413	\$3,051
FY18	\$902,788	\$237,447	441	\$2,047

Current State Group Health Plan Infertility Birth Costs FY15 – FY 18 Total

FY15 – FY18	Number of Births	Delivery Costs		Neonatal Costs	
		Delivery Cost per Contract	Total Delivery Costs	Neonatal Cost per Contract	Total Neonatal Costs
Single Births	181	\$10,000	\$1,810,000	\$21,000	\$3,801,000
Twin Births	15	\$21,000	\$315,000	\$106,500	\$1,597,500
Grand Total Three Year Costs			\$2,125,000		\$5,398,500

Current State Group Health Plan Prescription Infertility Coverage

Time Period	Paid	Member Share	Members	Plan Paid / Member
FY16	\$611,921	\$133,621		
FY17	\$901,526	\$173,653		
FY18	\$535,644	\$125,840	221	\$2,423.73

*final costs for infertility being reviewed

Changes to Current Coverage with Senate Bill 139

- Dependent Children are eligible
- Women are eligible for embryo transfer up to age 50
- Can be approved for coverage due to voluntary sterilization if now with different partner than when sterilization occurred
- Age appropriate AI and IUI need not be tried before IVF in certain circumstances
- No lifetime medical limit for all infertility services
- No lifetime pharmacy limit for all infertility services
- Services/prescriptions are to be provided at same cost share as those provided for non-fertility related services/prescriptions which would remove the 25% coinsurance currently paid by the members
- Cryopreservation and thawing of eggs, sperm and embryos

Cost to Adopt Senate Bill 139

- Medical estimates to cover all changes to current coverage as per prior slide:
 - \$5.25M
- Prescription estimates to cover all changes to current coverage – removing limits and changing cost share:
 - \$1.45M
- Total - \$6.7M

QUESTIONS?

